## Patient Care Workgroup Priorities (Draft 7/12/06)

The top priority for development over the next five years is a summary view of information (current and historical) pertaining to a patient from across all sources of care that includes the elements listed below.

Intermediate goals include transmission of information between clinicians and between clinicians and service providers by efficient electronic point-to-point communications.

Ability to view original documents (eg, laboratory results or clinic notes) is considered a valuable adjunct to the shared patient summary for validating or clarifying summary information or to obtain greater detail.

The following types of data were identified as having highest priority for viewing, ranked by clinical committee members. To the extent possible data should be normalized for easy importation into EMRs and other applications.

Priority	Ranking	Possible Data Sources
Identity/demographics	1	Claims EMR CCR
Diagnoses/encounter	2	Claims, EMR, CCR
diagnoses		
Medications	3	Pharmacies, EBMs and Claims, EMRs and e-prescribing programs
Allergies	4	EMR, CCR, pharmacy records, medication reconciliation document
Labs and other	5	Claims, CPOE (for orders); Electronic lab reporting, EMRs
diagnostics (results		(for results)
reporting)		
Procedures	6	Claims, CCR, EMR
Immunizations	7	WIR, RECIN
Patient visits and	8	Claims, CCR
hospitalizations		
Discharge summaries	9	Access attached to encounter records
and progress notes Patient contact-in-	10	Patient entry
	10	1 aucht chu y
emergency Advance directives	11	Patient entry
	12	j
Payer/insurance	12	Same
coverage/eligibility		